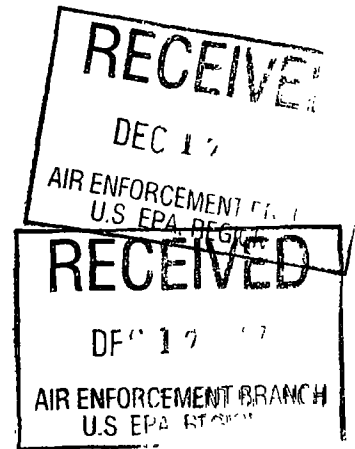




December 12, 2007

CERTIFIED MAIL: 7007 0710 0003 8973 9029
Indiana Department of Environmental Management
Compliance Data Section, Office of Air Quality
100 North Senate Avenue
Indianapolis, Indiana 46204



RE: 2006 Part 70 Annual Compliance Certification – Revised 12/11/07
Good Samaritan Hospital, Vincennes, Indiana
Operating Permit No.:
T083-7971-00027 (Effective 01/1/2006 to 09/26/2006)
T083-18224-00027 (Effective 9/27/2006 to 12/23/2006)

To Whom It May Concern:

Enclosed please find the revised Part 70 Annual Compliance Certification for calendar year 2006 for Good Samaritan Hospital, located in Vincennes, Indiana. ***This certification was revised and is being submitted in response to a letter dated 11/19/07 from Mr. Herman Carney of IDEM (attached).***

Please contact me at (812) 885-3381 with any questions regarding this submittal.

Sincerely,

Fred England
Vice-President, Professional and Support Services

Enc.

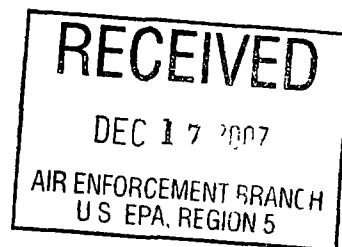
cc: ✓ United States Environmental Protection Agency, Region V
Air and Radiation Division, Air Enforcement Branch – Indiana (AE-17J)
77 West Jackson Boulevard
Chicago, Illinois 60604-3590
CERTIFIED MAIL: 7006 2760 0005 0185 7327

Ms. Wanda Stanfield
Indiana Department of Environmental Management
Office of Air Management, Compliance Section
100 North Senate Avenue
Indianapolis, Indiana 46204-2251
CERTIFIED MAIL: 7006 2760 0005 0185 7334

Stephen Bisch (Good Samaritan Hospital)
Sheri Bussard (EQ)

Improving the health of your community one patient at a time!

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR MANAGEMENT
COMPLIANCE DATA SECTION
PART 70 OPERATING PERMIT
CERTIFICATION



Source Name: Good Samaritan Hospital
Source Address: 520 South Seventh Street, Vincennes, Indiana, 47591
Mailing Address: SAME
Part 70 Permit No.: T083-7971-00027, January 1, 2006 to September 26, 2006
T083-18224-00027, September 27, 2006 to December 31, 2006

NOTE: The facility received a modified Title V permit on September 27, 2006. This compliance certification applies to both attached reports, one for the time period January 1, 2006 - September 26, 2006, and one for the time period September 27, 2006 - December 31, 2006.

This certification shall be included when submitting monitoring, testing reports/results or other documents as required by this permit.

Please check what document is being certified:

☒ **Annual Compliance Certification Letter - 2006 (revised 12/11/07)**

☐ Test Result (specify) _____

☐ Report (specify) _____

☐ Notification (specify) _____

☐ Other (specify) _____

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

Signature

Printed Name:

Fred England

Title/Position:

Vice President, Professional and Support Services

Date:

12-12-07

Submit semi-annual compliance reports and annual certification statement to:

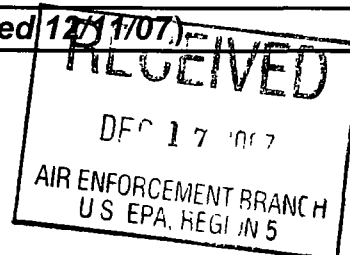
Indiana Department of Environmental Management
Compliance Data Section, Office of Air Quality
100 North Senate Avenue
Indianapolis, Indiana 46204

Submit annual certification statement to:

United States Environmental Protection Agency, Region V
Air and Radiation Division, Air Enforcement Branch - Indiana (AE-17J)
77 West Jackson Boulevard
Chicago, Illinois 60604-3590

PART 70 ANNUAL COMPLIANCE CERTIFICATION (revised 12/11/07)

Source Name: Good Samaritan Hospital
Source Address: 520 South Seventh Street, Vincennes, IN 47591
Part 70 Permit No.: T083-7971-00027
Reporting Period: 1/1/06 - 9/26/06
Contact Person: Stephen Bisch
Phone/Fax No.: (812) 885-3381



The following compliance determinations were based on intermittent monitoring such as observations, inspections, and records

NOTE: The facility received a modified Title V permit on September 27, 2006. This compliance certification demonstrates compliance with the time previous to the modified permit (January 1, 2006 to September 26, 2006).

Section A. Source Summary

The information in Section A is correct, with the following two exceptions

- Section A1 The responsible official is Mr. Scott Kaminski, Vice President, Professional and Support Services
- Section A1 The zip code of the hospital is 47591

Section B. General Conditions

Good Samaritan Hospital was in continuous compliance with all of the Section B permit terms and conditions that impose a work practice or emission standard or require performance testing, monitoring, recordkeeping, or reporting based on the monitoring methods in Section B of the permit, except for the terms and conditions listed below

Permit Term Number and Paraphrased Description	Compliance Status	Method for Determining Compliance	Report Date/Comments
NONE			

(a) CC = continuous compliance, IC = intermittent compliance

Section C. Source Operation Conditions

Permit Term Number and Paraphrased Description	Compliance Status CC/IC (a)	Method for Determining Compliance (b)	Report Date/Comments
C 1 Particulate matter emission limitations for processes with process weight rates less than 100 lbs/hr	CC	RK	
C 2 Opacity	CC	VE/WP	
C 3 Open Burning	CC	WP	
C 4 Incineration	CC	RK	
C 5 Fugitive Dust Emissions	CC	WP	
C 6 Operation of Equipment	CC	WP	
C 7 Stack Height	CC	RK	
C 8 Asbestos Abatement Projects	CC	RK	
C 9 Performance Testing	CC	RK	
C 10 Compliance Schedule	CC	RK	
C 11 Compliance Monitoring	CC	RK	
C 12 Monitoring Methods	CC	RK	
C 13 Emergency Reduction Plans	CC	RK	
C 14 Risk Management Plan	CC	RK	
C 15 Compliance Monitoring Plan - Failure to Take Response Steps	CC	RK	
C 16 Actions Related to Noncompliance Demonstrated by a Stack Test	CC	RK	
C 17 Emission Statement	CC	RK	Emission statement submitted May 2006
C 18 Monitoring Data Availability	CC	RK	
C 19 General Recordkeeping Requirements	CC	RK	
C 20 General Reporting Requirements	CC	RR	
C 21 Compliance with 40 CFR 82 and 326 IAC 22-1, Stratospheric Ozone Protection	CC	WP	

(a) CC = continuous compliance, IC = intermittent compliance

(b) RK = recordkeeping, WP = work practice, RR = records review, VE = visible emissions

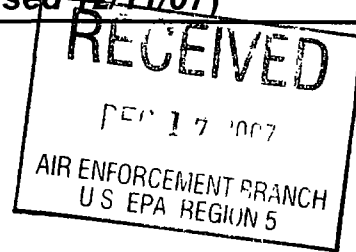
Section D.1 Facility Operation Conditions - EU1 - Medical Waste Incinerator

Permit Term Number and Paraphrased Description	Compliance Status CC/IC (a)	Method for Determining Compliance	Report Date/Comments
D 1 1 EU1 shall have a charge rate of less than 500 lbs/hr of medical waste	CC	Other	The time and weight of each charge is recorded, operator sums charges per clock hour and ceases charging when total hourly waste charged approaches 500 pounds
D 1 2 EU1 shall comply with the following or terminate operation immediately			
(a) consist of primary and secondary chambers or equivalent	CC	Other	Compliance inherent based on the design of the incinerator
(b) be equipped with a primary burner unless burning wood products	CC	Other	Compliance inherent based on the design of the incinerator
(c) opacity shall not exceed 40% in any 6-minute period and 60% for more than a total of 15 minutes in a 6-hour period	CC	Other	Superseded by a more stringent permit limit at D 1 4(b)(10), compliance inherent based on good operating practices
(d) be maintained properly as specified by manufacturer	CC	Other	Preparation and implementation of a Preventative Maintenance Plan
(e) be operated according to the manufacturer's recommendation and only burn waste approved by IDEM	CC	Other	Preparation and implementation of an Operator Training Plan
(f) comply with other rules relating to installation and operation of incinerators	CC	Other	See other terms of this permit
(g) operate so that emissions of hazardous materials are prevented	CC	Other	Preparation and implementation of a Preventative Maintenance Plan and an Operator Training Plan
(h) not create a nuisance or a fire hazard	CC	Other	Preparation and implementation of a Preventative Maintenance Plan and an Operator Training Plan
(i) particulate matter emissions limited to 0.3 lbs/1,000 lbs dry standard exhaust gas corrected to 50% excess air	CC	Stack test	4/13/05 stack test and 5/23/06 stack test showed compliance with this limit
D 1 3 40 FR 60, Subpart A - General Provisions apply	CC	Other	N/A
D 1 4 HMIWI Requirements			
(a) EU1 must comply with 326 IAC 11-6 and 40 CFR 60, Subpart C within one year of the effective date of the rule, or by March 31, 2002 if the facility is undergoing retrofit to come into compliance	IC	Other	Good Samaritan Hospital DID NOT exceed any emission limits (see below). However, 40 CFR 60.56c(d)(2) requires that the affected facility not operate outside of its range of allowable operating parameter values. Good Samaritan Hospital did have variances of this requirement in 2006 as noted in Semi-Annual Report 1 submitted ~7/28/06, and in Semi-Annual Report 2 submitted ~1/22/07.
(b) EU1 must comply with the following emission limits			
(1) 0.03 gr/dscf particulate matter	CC	Other	4/13/05 stack test and 5/23/06 stack test showed compliance with this limit
(2) 40 ppmv CO	CC	Other	5/23/06 stack test showed compliance with this limit
(3) 55 gr/billion dscf total dioxin/furans or 1.0 gr/billion dscf toxic equivalent quantity	CC	Other	1/17-18/02 stack test showed compliance with limit
(4) 100 ppmv HCl or a 93% reduction	CC	Other	5/23/06 stack test showed compliance with this limit
(5) 55 ppmv SO ₂	CC	Other	1/17-18/02 stack test showed compliance with limit
(6) 250 ppmv NO _x	CC	Other	1/17-18/02 stack test showed compliance with limit
(7) 0.52 gr/1000 dscf Pb or a 70% reduction	CC	Other	1/17-18/02 stack test showed compliance with limit
(8) 0.07 gr/1000 dscf Cd or a 65% reduction	CC	Other	1/17-18/02 stack test showed compliance with limit

(9) 0.24 gr/1000 dscf Hg or a 85% reduction	CC	Other	1/17-18/02 stack test showed compliance with limit
(10) 10% opacity as a 6-minute average	CC	Other	4/13/05 stack test and 5/23/06 stack test showed compliance with this limit
D 1 5 EU1 shall not operate unless a certified HMIWI operator is accessible at the facility or available within one hour. The facility should maintain records summarizing applicable standards, a description of basic combustion theory, procedures for receiving, handling, and charging waste, incinerator startup, shutdown, and malfunction procedures, procedures for maintaining proper combustion air supply levels, operating instructions for incinerator and air pollution controls, procedures for responding to malfunction, procedures for monitoring emissions, reporting and recordkeeping, and ash handling procedures. This information shall be reviewed with the HMIWI operator(s) within 1 year of the effective date of this rule and annually thereafter.	CC	Other	Annual refresher training was performed as required. A certified operator is currently stationed at the facility and the required information is currently maintained onsite.
D 1 6 The source must prepare and submit a waste management plan no later than 60 days following the initial performance test.	CC	Other	Waste management plan was submitted March 18, 2002
D 1 7 The waste gas stream from EU1 must have a direct flame afterburner or other approved control for	CC	Other	Compliance inherent based on the design of the incinerator
D 1 8 A Preventive Maintenance Plan is required for EU1	CC	Other	Preparation and implementation of a Preventative Maintenance Plan
D 1 9 An initial performance test must be performed by March 31, 2002 to demonstrate compliance with limits in D 1 4. Additional testing to demonstrate compliance with the PM, CO, HCl, and opacity emission limits in D 1 4 must be performed annually thereafter.	IC	Other	January 17-18 2002 Initial Stack Test, annual stack test 5/23/06. Due to an incinerator malfunction, the annual stack test was not performed within 12 months of the prior test as required. Notification submitted 4/20/06
D 1 10 EU1 shall take the following steps to be in compliance by the March 31, 2002 deadline:			
(a) Submit a final control plan by June 30, 1999	CC	Other	Final control plan was prepared and submitted to IDEM on June 28, 1999
(b) Award contracts for controls/process modifications by March 31, 2000	CC	Other	Contract for control awarded in March 2000, IDEM notified in a letter dated March 22, 2000
(c) Initiate on-site construction or installation of control or process modifications by March 31, 2001	CC	Other	On-site construction initiated December 28, 2000, IDEM notified in a letter dated March 23, 2001
(d) Complete on-site construction or installation of control or process modifications by September 30, 2001	CC	Other	Installation of scrubber completed by August 2001, IDEM notified in a letter on or around September 4, 2001
(e) Be in final compliance by March 31, 2002	CC	Other	January 17-18 2002 Stack Test
(f) Meet the operator training and qualification requirements within one year of the effective date of the rule	CC	Other	See D 1 5
D 1 11 Compliance monitoring shall be performed based on the type of control installed, data shall be obtained at least 75% of the operating hrs/day and 90% of the operating days/calendar quarter when EU1 is combusting hospital, medical, or infectious waste.	IC	Other	2nd Quarter reported 7/27/06
D 1 12 Daily visual observations of the stack exhaust shall be performed each day until March 31, 2002. A trained employee should record whether emissions are "normal" or "abnormal."	CC	Other	Observations through March 31, 2002 are recorded in a log and maintained onsite.
D 1 13 The facility shall keep the following records:			
(a) Demonstration of compliance with limits in D 1 4, maintain at least 5 years	CC	RK	
(b) Demonstration of compliance with visible emission observation requirements of D 1 12 through March 31, 2002	CC	Other	Observations through March 31, 2002 are recorded in a log and maintained onsite.

PART 70 ANNUAL COMPLIANCE CERTIFICATION (revised 12/11/07)

Source Name: Good Samaritan Hospital
Source Address: 520 South Seventh Street, Vincennes, IN 47591
Part 70 Permit No.: T083-7971-00027
Reporting Period: 9/27/06 - 12/31/06
Contact Person: Stephen Bisch
Phone/Fax No.: (812) 885-3381



The following compliance determinations were based on intermittent monitoring such as observations, inspections, and records

NOTE: The facility received a modified Title V permit on September 27, 2006. This compliance certification demonstrates compliance with the time after the modified permit was final (September 27, 2006 to December 31, 2006).

Section A. Source Summary

The information in Section A is correct

Section B. General Conditions

Good Samaritan Hospital was in continuous compliance with all of the Section B permit terms and conditions that impose a work practice or emission standard or require performance testing, monitoring, recordkeeping, or reporting based on the monitoring methods in Section B of the permit, except for the terms and conditions listed below

Permit Term Number and Paraphrased Description	Compliance Status	Method for Determining Compliance	Report Date/Comments
NONE			

Section C. Source Operation Conditions

Permit Term Number and Paraphrased Description	Compliance Status	Method for Determining Compliance (b)	Report Date/Comments
C 1 Particulate matter emission limitations for processes with process weight rates less than 100 lbs/hr shall not	Continuous	Recordkeeping	
C 2(a-b) Opacity	Continuous	Work Practice/VE Check	
C 3 Open Burning	Continuous	Work Practice	
C 4 Incineration	Continuous	Recordkeeping	
C 5 Fugitive Dust Emissions	Continuous	Work Practice	
C 6 Stack Height	Continuous	Recordkeeping	
C 7(a-g) Asbestos Abatement Projects	Continuous	Recordkeeping	
C 8 Performance Testing	Continuous	Recordkeeping	
C 9 Compliance Requirements	Continuous	Recordkeeping	
C 10 Compliance Monitoring	Continuous	Recordkeeping	
C 11 Monitoring Methods	Continuous	Recordkeeping	
C 12(a-b) Instrument Specifications	Continuous	Recordkeeping	
C 13(a-b) Emergency Reduction Plans	Continuous	Recordkeeping	
C 14 Risk Management Plan	Continuous	Recordkeeping	
C 15(a-e) Response to Excursions or Exceedances	Continuous	Recordkeeping	
C 16(a-c) Actions Related to Noncompliance Demonstrated by a Stack Test	Continuous	Recordkeeping	
C 17(a-b) Emission Statement	Continuous	Recordkeeping	No emission statement due between 9/27/06 - 12/31/06
C 18(a-b) General Recordkeeping Requirements	Continuous	Recordkeeping	
C 19(a-e) General Reporting Requirements	Continuous	Records Review	
C 20(a-c) Compliance with 40 CFR 82 and 326 IAC 22-1, Stratospheric Ozone Protection	Continuous	Work Practice	

Section D.1 Facility Operation Conditions - EU1 - Medical Waste Incinerator

Permit Term Number and Paraphrased Description	Compliance Status	Method for Determining Compliance	Report Date/Comments
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D 1 1 EU1 shall have a charge rate of less than 500 lbs/hr of medical waste	Continuous	Standard	The time and weight of each charge is recorded, operator sums charges per clock hour and ceases charging when total hourly waste charged approaches 500 pounds
D 1 2- 40 CFR 63 Subpart A and B apply	Continuous	Standard	N/A
D 1 3 HMIWI Requirements- EU1 shall comply with the following			
(a) 0 03 gr/dscf particulate matter	Continuous	Testing	5/23/06 stack test showed compliance with this limit
(b) 40 ppmv CO	Continuous	Testing	5/23/06 stack test showed compliance with this limit
(c) 55 gr/billion dscf total dioxin/furans or 1 0 gr/billion dscf toxic equivalent quantity	Continuous	Testing	1/17-18/02 stack test showed compliance with limit
(d) 100 ppmv HCl or a 93% reduction	Continuous	Testing	5/23/06 stack test showed compliance with this limit
(e) 55 ppmv SO2	Continuous	Testing	1/17-18/02 stack test showed compliance with limit
(f) 250 ppmv NOx	Continuous	Testing	1/17-18/02 stack test showed compliance with limit
(g) 0 52 gr/1000 dscf Pb or a 70% reduction	Continuous	Testing	1/17-18/02 stack test showed compliance with limit
(h) 0 07 gr/1000 dscf Cd or a 65% reduction	Continuous	Testing	1/17-18/02 stack test showed compliance with limit
(i) 0 24 gr/1000 dscf Hg or a 85% reduction	Continuous	Testing	1/17-18/02 stack test showed compliance with limit
(j) 10% opacity as a 6-minute average	Continuous	Testing	5/23/06 stack test showed compliance with this limit
D 1 4 HMIWI Operator Training and Qualification Requirements			
(a) The HMIWI shall not operate unless a certified operator is accessible at the facility or available	Continuous	Standard	A certified operator is currently stationed at the facility
(b) Maintain documentation of the following			
(1) Summary of applicable standards	Continuous	Recordkeeping	Records maintained as required
(2) Description of basic combustion theory applicable to HMIWI	Continuous	Recordkeeping	Records maintained as required
(3) Procedures for receiving, handling, and charging waste	Continuous	Recordkeeping	Records maintained as required
(4) HMIWI startup, shutdown, and malfunction procedures	Continuous	Recordkeeping	Records maintained as required
(5) Procedures for maintaining proper combustion air supply levels	Continuous	Recordkeeping	Records maintained as required
(6) Procedures for operating HMIWI and air pollution control systems	Continuous	Recordkeeping	Records maintained as required
(7) Procedures for responding to periodic malfunction or conditions that may lead	Continuous	Recordkeeping	Records maintained as required
(8) Procedures for monitoring HMIWI emissions	Continuous	Recordkeeping	Records maintained as required
(9) Reporting and recordkeeping procedures	Continuous	Recordkeeping	Records maintained as required
(10) Procedures for handling ash	Continuous	Recordkeeping	Records maintained as required
(c) Review information in D 1 4(b) with each HMIWI operator each year	Continuous	Records Review	Annual refresher training performed as required
(d) Keep information in D.1 4(b) readily accessible	Continuous	Recordkeeping	Record accessible
D 1 5 A Preventive Maintenance Plan is required for the facility and its control device (EU1)	Continuous	Standard	Preparation and implementation of a Preventative Maintenance Plan
D 1 6 Compliance Testing Requirements			

(a) Pursuant to 326 IAC 11-6-7(a) and 40 CFR 60, Subpart Ce, 60 37e, must conduct testing to demonstrate compliance with the PM, CO, HCl, and opacity emission limits annually	Intermittent	Testing & Monitoring	Performed stack testing as required, initial stack test January 17-18, 2002, annual stack test 5/23/06 Good Samaritan Hospital <u>DID NOT</u> exceed any emission limits (see D 1 3) However, 40 CFR 60 56c(d)(2) requires that the affected facility not operate outside of its range of allowable operating parameter values determined from these stack tests Good Samaritan Hospital did have variances of this requirement as noted in Semi-Annual Report 2, submitted ~1/22/07
(b) IDEM may require compliance testing at any time to determine if the facility is in compliance	Continuous	Standard	
D 1 7 Monitoring Requirements			
(a) Install, calibrate, maintain, and operate devices (or methods) to monitor the max charge rate, max flue gas temperature, and minimum secondary chamber temperature except during periods of startup or shutdown	Continuous	Standard	Parameters monitored as required
(b) Install, calibrate, maintain, and operate a device (or method) to measure the use of the bypass stack	Continuous	Standard	Parameters monitored as required
(c) Obtain monitoring data at all times when HMIWI is in operation except during equipment malfunction, calibration, or repair Data shall be obtained at least 75% of the operating hrs/day and 90% of the operating days/calendar quarter when the HMIWI is combusting hospital, medical, or infectious waste	Continuous	Monitoring	Monitoring records obtained as required
D 1 8 (a-e) Daily visual observations of the S1 stack exhaust shall be performed each day during normal daylight hours A trained employee should record whether emissions are "normal" or "abnormal"	Continuous	Monitoring	Observations are recorded as required
D 1 9 Record Keeping Requirements			
(a) To document compliance with D 1 8 maintain records of daily S1 VE notations	Continuous	Recordkeeping	Observations are recorded as required
(b) Maintain records according to Section C	Continuous	Recordkeeping	Records maintained as required
D 1 10 Maintain the following records for at least 5 years			
(a) Keep records and dates of the following			
(1) Concentration of pollutant listed in 40 CFR 60 52c	Continuous	Recordkeeping	Records maintained as required
(2) HMIWI charge dates, times, weights, and hourly charge rates	Continuous	Recordkeeping	Records maintained as required
(3) Record secondary chamber temperature once a minute during operation	Continuous	Recordkeeping	Records maintained as required
(4) Record use of bypass stack, including dates, times, durations	Continuous	Recordkeeping	Records maintained as required
(5) Maintain all operating parameter data collected	Continuous	Recordkeeping	Records maintained as required
(b) Identify dates monitoring data not obtained, with identification of parameters not measured, reasons for not obtaining data, and describe corrective action	Continuous	Recordkeeping	Records maintained as required
(c) Identify malfunctions dates, time, duration, description, and corrective action	Continuous	Recordkeeping	Records maintained as required
(d) Identify emission rate/parameter exceedances description and reason of exceedance and corrective action taken	Continuous	Recordkeeping	Records maintained as required
(e) Record results of initial and subsequent performance tests conducted to establish operating parameters.	Continuous	Recordkeeping	Records maintained as required

D 2 5 (a-e) Daily visual observations of the S2 stack exhaust shall be performed each day during normal daylight hours. A trained employee should record whether emissions are "normal" or "abnormal"	Continuous	Monitoring	Daily visual observations are performed when combusting fuel oil
D 2 6 The facility shall keep the following records			
(a) Document compliance with limits in D 2 2 (maintain records for 5 years)			
(1) calendar dates covered in compliance determination period	Continuous	Recordkeeping	Fuel oil usage reports
(2) actual fuel oil usage since last compliance determination period and equivalent SO ₂ emissions	Continuous	Recordkeeping	Fuel oil usage reports
(3) to certify compliance when burning natural gas only, the Permittee shall maintain records of fuel used	Continuous	Recordkeeping	Fuel oil usage reports
(4) fuel supplier certification (if fuel certifications used for compliance)	Continuous	Recordkeeping	Fuel oil usage reports
(5) fuel supplier name (if fuel certifications used for compliance)	Continuous	Recordkeeping	Fuel oil usage reports
(6) a statement from the fuel supplier that certifies the sulfur content of the fuel oil (if fuel certifications used for compliance)	Continuous	Recordkeeping	Fuel oil usage reports
(b) Demonstration of compliance with visible emission observation requirements of D 2 5 for the boiler exhaust stack	Continuous	Recordkeeping	Records of daily visual observations performed when firing oil are maintained onsite
(c) Maintain records according to Section C	Continuous	Recordkeeping	Records maintained as required
D 2 7 Reporting Requirements			
(a) Submit natural gas boiler certification within 30 days of the end of each 6 month reporting period	Continuous	Reporting	Semi-Annual Compliance Reports
(b) Submit monthly records of average sulfur content, heat content, fuel consumption, and sulfur dioxide emission rate in lb/MMBTU at IDEM's request	Continuous	Reporting	Reports submitted if requested by IDEM

Section D.3 Facility Operation Conditions - GEN1, GEN2, GEN3, GEN4 - 4 Diesel Fueled Electricity Generators

Permit Term Number and Paraphrased Description	Compliance Status	Method for Determining Compliance	Report Date/Comments
D 3 1 Each generator is limited to 1000 annual operational hours, on a 12-month rolling average	Continuous	Recordkeeping	
D 3 2 Monitoring requirements			
(a) Equip each generator with a meter measuring operating time. Record hours of operation on a monthly basis	Continuous	Monitoring/Recordkeeping	Monitor installed, Records maintained as required
(b) Calculate compliance with hourly generator usage restriction within 30 days of end of each month	Continuous	Recordkeeping	Records maintained as required
D 3 3 Recordkeeping requirements			
(a) Maintain records of hours of operation for each generator used on a monthly basis	Continuous	Recordkeeping	Records maintained as required
(b) Maintain records according to Section C	Continuous	Recordkeeping	Records maintained as required
D 3 4 A quarterly report documenting compliance with D 3 1 must be submitted within 30 days of the end of the reporting period	Continuous	Reporting	Quarterly compliance reports

Section D.4 Facility Operation Conditions- Insignificant Activities

Permit Term Number and Paraphrased Description	Compliance Status	Method for Determining Compliance	Report Date/Comments
D 4 1 The emission rate for insignificant activities is limited by 326 IAC 6-3-2	Continuous	Records review	